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PTO/SB/21 (09-06)

Approved for use through 03/31/2007, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/575.828 Filing Date TRANSMITTAL April 14, 2006 First Named Inventor **FORM** Robert Francis RYAN Art Unit 1744 **Examiner Name** (to be used for all correspondence after initial filing) Attorney Docket Number M03V200

Total Number of I	Pages in This Submission			1010012				
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Fee Transi Fee Amendmen Afte Affe Extension Express Al	mittal Form e Attached nt/Reply er Final idavits/declaration(s) of Time Request pandonment Request in Disclosure Statement opy of Priority	ENCLOSURES (Check all that apply) □ Drawing(s) □ After Allowance Communication to To To Appeal Communication to Board of Appeals and Interferences □ Petition □ Appeal Communication to Board of Appeals and Interferences □ Petition to Convert to a Provisional Application □ Proprietary Information □ Power of Attorney, Revocation Change of Correspondence Address □ Status Letter □ Other Enclosure(s) (please Identify below): □ Request for Refund □ Itemized Certificate of Mailing, Fee Transmittal Form (1 pagin duplicate, PTO/SB1/17), executed Dever of Attorney and Correspondence Address Indication Forms (2 pages), Information Disclosure Statems (2 pages), Completed forms PTO/SB/08AB with Three (3) references (AD-AF, including 1 page of English-language abstract), and Return Receipt Postcard					al Communication to Board beals and Interferences at Communication to TC at Notice, Brief, Reply Brief) etary Information Letter Enclosure(s) (please Identify): te of Mailing, Fee Transmittal Form (1 page, WSB/17), executed Declaration (1 page), of Attorney and Correspondence Address (2 pages), Information Disclosure Statement leted forms PTO/SB/08A&B with Three (3) F, including 1 page of English-language thum Receipt Postcard	
Document(Reply to M Incomplete Re	(s) issing Parts/ Application ply to Missing Parts der 37 CFR 1.52 or 1.53	It is not believed at this time that any additional fee is due. As a precaution, the Commissioner is hereby authorized to charge to Deposit Account No. 02-2865 any additional fee required by this submission or credit any overpayment.						
Firm Name	The BOC Group, Inc	c.						
Signature	My HV-	25						
Printed name	Philip H. Von Neida							
Date	November 3, 2006		Reg. No.	34,942				
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Fees pursuant to the Consolida	ated Appropria	tions Act, 2005 (H.R.	4818). ■	Application Num	ber	10/575,828	3					
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For	FY 20	005		First Named Inve	entor	Robert Fra	ncis RYAN	<u> </u>				
	Examiner Name											
Applicant claims small	Art Unit 1744											
TOTAL AMOUNT OF PAYE	MENT (\$)	130.00		Attorney Docket	No.	M03V200						
METHOD OF PAYMENT	(check all	that apply)										
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 02-2865 Deposit Account Name: The BOC Group, Inc.												
For the above-identit				reby authorized to:	(check	all that apply	y)					
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under 37 CFR under 37 CFR	1 16 and 1	17		٠	•		form. Provid	le credit card				
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FEE CALCULATION												
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Utility	300	150	500	250	200		-					
Design	200	100	100	50	130		-					
Plant	200	100	300	150	160							
Reissue	300	150	500	250	600							
Provisional	200	100	0	0	() 0		11 12 - 414 -				
2. EXCESS CLAIM FEE Fee Description Each claim over 20 (i Each independent cla	<u>e (\$) </u>	nall Entity Fee (\$) 25 100										
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HP = highest number of total Indep. Claims	claims paid fo		Fee	e Paid (\$)								
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listings under 37 CI	FR 1.52(e))	, the application	size fe	ee due is \$250 (\$	125 fo	r small enti	ty) for eac	h additional 50				
sheets or fraction th <u>Total Sheets</u>	ereof. See Extra Shee	ets <u>Numbér</u>	1)(G) of ea	ch additional 50 o	r fracti	on thereof	Fee (\$)	Fee Paid (\$)				
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing	g surcharge): <u>late filing surchar</u>	ge					\$130.00				
SUBMITTED BY												
Signature ///	16-1	· 🗸		Registration No. (Attorney/Agent)	4,942	1	Felephone 90	08-771-6402				
Name (Print/Type) Philip H	on Neida						Date Novem	ber 3, 2006				

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Attorney Docket: M03V200 Serial No.: 10/575,828 Filed: April 14, 2006 Confirmation No.: 6770

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Transmittal Form (PTO/SB/21), Fee Transmittal Form (1 page, in duplicate, PTO/SB/17), executed Declaration (1 page), executed Power of Attorney and Correspondence Address Indication Forms (2 pages), Information Disclosure Statement (2 pages), Completed forms PTO/SB/08A&B with Three (3) references (AD-AF, including 1 page of English-language abstract), and Return Receipt Postcard

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